

Heart-healthy and Stroke-free Living with Dr. Amy L. Doneen, DNP, ARNP

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Thoughts from Dr. Anny 5 Healthy Lifestyle Steps that Lower Stroke Risk 90%

May is American Stroke Month, in which clinicians and patients are urged to take action, spread the word, and work "together to end stroke, *before* it even happens." Rates of this devastating condition (also known as "brain attack") are rising in younger adults, with the biggest surge in people ages 35 to 44, according to <u>a new study</u> published in *JAMA Neurology*. The researchers also report that the



proportion of people with at least three major risk factors for stroke has gone up in all age groups, and nearly doubled in people ages 35 to 44.

Every year, 795,000 Americans have strokes--and for one out of four of them, it's a repeat event. Yet regardless of your age or family history, strokes are preventable! Large studies show that an optimal lifestyle can cut stroke risk up to 90%, making it more powerful than any medication or surgery ever invented! Here are five things you can do to live well and stroke free.

- 1. Exercise regularly. Compared to people who work out four or more times a week, those who are sedentary are 20% more likely to suffer a stroke or mini-stroke (also known as a transient ischemic attack or TIA), according to <u>a study</u> of 30,239 adults of diverse ethnicities, ages 45 or older. The Bale Doneen Method recommends getting 22 minutes (or more) a day of aerobic exercise, such as jogging, biking, swimming or brisk walking. Check with your medical provider before starting a new exercise program to make sure it's right for you.
- **2. Eat more fruits and vegetables.** Consuming more produce could add years to your life, according to <u>an analysis of studies</u> that included about 2 million people worldwide. Those who ate the most fruit and veggies (about 1.7 pounds daily) cut their risk for stroke by 16%, risk for heart disease by 28%, risk for cancer by 13%, and risk for early death by 27%, compared to those who ate the least produce. As discussed more fully in the Bale Doneen book *Beat the Heart Attack Gene*, we use genetic tests to identify the best diet for each patient.

- **3. Avoid nicotine and secondhand smoke.** Every year, secondhand smoke causes more than 8,000 deaths from stroke, while smoking (and other types of nicotine use, such as vaping or chewing tobacco) causes one in three deaths from cardiovascular disease (CVD): plaque in the arteries that can lead to a heart attack or stroke. Smoking makes blood stickier and more likely to clot, which can block blood flow to the heart (triggering a heart attack) or the brain (leading to a stroke).
- **4. Slim down, particularly around the middle.** Stroke risk is lowest for people with a body mass index (BMI) of 25 or less (a weight of 141 pounds or less for an average 5'3" woman or 169 or less for a 5' 9" man). Even if your BMI is in the healthy range, large studies show that having a waistline above 35 inches for a woman or above 40 inches for a man can more than double risk for CVD. Interval training (alternating short bursts of higher intensity exercise with intervals of lighter activity) is an excellent way to shed pounds and flatten your belly, studies suggest.
- **5. Take great care of your teeth.** As <u>a landmark Bale Doneen study</u> recently discovered, gum disease due to certain high-risk oral bacteria can actually cause CVD. These findings were further confirmed by <u>a new study</u> by U.S. and Japanese researchers linking oral bacteria to several kinds of stroke, including brain bleeding that can lead to dementia. Saliva tests to check for high-risk oral bacteria through DNA analysis are available from OralDNA, OraVital, and Hain Diagnostics. Talk to your dental provider about the best way to optimize your oral-- and arterial--health.



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The No. 1 Risk for Stroke and What to Do About It

The world's leading cause of death and disability is also the most preventable: High blood pressure is a stealthy assassin that wreaks silent havoc on your blood vessels and vital organs, including your heart, brain and kidneys. Nearly one in three adults has hypertension, the leading risk for stroke and a major contributor to heart disease. Yet nearly half of these people don't have their disorder under control, despite the availability of low-cost, effective medications for hypertension, according to research presented at a recent Bale Doneen Scientific Update for healthcare providers.

What's the optimal blood pressure goal--and what are the best ways to achieve it? Here's a look at the latest scientific discoveries, plus key takeaways you can use to dramatically reduce your risk for strokes and heart attacks.

1. One in three adults have a blood pressure disorder that doubles risk for fatal cardiovascular events, yet often goes untreated. Along with the 67 million Americans who have hypertension (systolic blood pressure-the top number--of 140 or above OR diastolic pressure--the bottom numberof 90 or above), another 70 million have pre-hypertension (systolic pressure between 120 and 139 OR diastolic pressure of 80 to 89). Until recently, people with pre-hypertension were often told that their blood pressure was "a little high, but nothing to worry about." Actually, studies show that prehypertension raises stroke risk by 55% and more than triples it for heart attack!

Bale Doneen takeaway: Have your blood pressure checked regularly and talk to your healthcare provider about how to lower it if even *one* of your numbers is abnormal. Treatments for high blood pressure include lifestyle and dietary changes and in many cases, medication.

2. There is a new, lower target for blood pressure. Until recently, a commonly recommended target for systolic pressure was 140. A landmark clinical trial called SPRINT compared outcomes in people treated to this target (using an average of two medications) with those who received more intensive treatment to reduce their systolic pressure to 120. The more intensive therapy, which involved taking an average of three medications, reduced rates of cardiovascular events, such as heart attacks, strokes and heart failure, by nearly one-third. The study included more than 9,300 people ages 50 and older of diverse ethnicities with a combination of high blood pressure and at least one other risk factor for heart disease,

Bale Doneen takeaway: SPRINT data is powerful! Reducing the blood pressure goal from 140 to 120 saved lives, since there were 25% fewer deaths from cardiovascular and other causes in the group that received the intensive therapy. That's an extremely impressive benefit from taking one additional medication!

3. Elevated systolic blood pressure (SBP) is more dangerous than smoking or obesity! A 2017 study that examined data from 8.69 million people from 154 countries found that SBP of 110 or higher is one of the top risks for health problems, including coronary artery disease (plaque buildup in the vessels that feed the heart), stroke and chronic kidney disease. The researchers also reported that 30% of the disease burden fell on those with SBP of 110 to 135. **Bale Doneen takeaway:** While SBP of 110 to 119 is *not* cause for concern, you may want to discuss natural ways to reduce blood pressure with your medical provider. These include mindful meditation to reduce stress (an important contributor to elevated blood pressure), beet juice (which has been shown to reduce SPB 4 to 5 points within hours of drinking it), eating foods that are rich in magnesium (which helps regulate blood pressure), such as dark green leafy vegetables, unrefined grains, and legumes, and getting 7 to 8 hours of sleep a night (skimping on slumber is linked to increased risk for hypertension).

4. Your morning blood pressure may be the best predictor of heart attack and stroke risk. A 2016 study of 21,591 people with hypertension found that morning measurements (when blood pressure tends to be highest) were more accurate for predicting which participants might be headed for a heart attack or stroke, compared to readings taken at home in the evening or those performed by clinicians in medical settings. The rate of CV events was significantly higher in people whose morning SBP was 145 or higher, compared to those with a reading below 125.

Bale Doneen takeaway: While home blood pressure readings are an important way for people with hypertension to monitor their health, it's crucial to know the right technique, When using a wrist blood-pressure cuff, the reading will be inaccurate unless the device is positioned at heart level. A good way to tell if the device is correctly positioned is to hold the arm with the BP cuff across your chest as you would if the national anthem were playing.

Cauliflower Crust Pizza

Eating more fruits and vegetables has many benefits, including lower risk for stroke, heart disease and cancer. A large study found that cruciferous veggies, such as cauliflower and broccoli, are particularly good for your heart and arteries. Here's an easy, delicious way to enjoy cauliflower. This recipe can also be used as a flavorful flatbread for sandwiches.



Preheat oven to 400°F. Line a baking sheet or pizza pan with parchment paper. Pulse florets in food processor until minced to the size of rice.* Steam in steamer basket for about 5 minutes over boiling water, then pour into strainer or colander lined with a clean dishtowel. Cool, then twist towel tightly to wring out liquid.

Transfer cauliflower into large bowl, add eggs, cheeses, spices, garlic and salt (if using) and mix well. Transfer mixture to parchment-lined pizza pan or cooking sheet and shape into a circular pizza crust about 1/4 inch thick, packing down mixture firmly. Bake 20 minutes, add pizza toppings, and bake 10 minutes more. Slice into wedges and serve with your favorite salad. Adapted from Foodnetwork.com and Detoxinista.com.

*Some grocery stores sell "riced" cauliflower (and broccoli too), which can be a handy time-saver in making this recipe.